



Fulton County

REDUCE • REUSE • RECYCLE

FULTON COUNTY
DEPT. OF SOLID WASTE
P.O. Box 28
JOHNSTOWN, NY 12095

(518) 736-5501
FAX: (518) 762-2859

Jeffrey Bouchard, Director

TO: FULTON COUNTY LANDFILL PERMIT APPLICANTS
FROM: JEFFREY W. BOUCHARD, DIRECTOR
SUBJECT: FULTON COUNTY LANDFILL USER PERMIT

Please read all of the enclosed information carefully. Your right to use the Fulton County Sanitary Landfill depends on it.

Fulton County has implemented a user permit system for the Fulton County Sanitary Landfill. All necessary application forms, as well as instruction for filling out the forms, are enclosed.

The Fulton County Board of Supervisors adopted a local law, which is known as the "Fulton County Solid Waste Management Law". This local law established the framework for the Department of Solid Waste to administer the permit process.

Upon approval, the user permit will be valid until December 31 of each year. Renewal applications must be filed a minimum of thirty (30) days prior to the expiration date. If you desire to amend your permit; i.e. adding a new truck, notify the Department of Solid Waste a minimum of five (5) days in advance of use.

Attach the permit application fee to your completed application. Make checks payable to the Fulton County Treasurer. Send completed forms and check to the Department of Solid Waste, P.O. Box 28, Johnstown, NY, 12095.

Please note that the Solid Waste Management Law provides Fulton County with a mechanism to revoke landfill privileges of users violating said local law.

If you have any questions concerning the above, contact the Department of Solid Waste, at the above telephone number.

JB:rk
Enclosures

Part A: Applicant Information

For County Use Only:

Account No. _____

Date Issued _____

Initials _____

Check One:

Cash Only _____

On Acct. _____

1. Applicant Business Name: (print/type)

2. Billing Address: _____

(Title)

(Phone)

(Fax)

5. Legal Character of Business (check one):

Corporation _____ Partnership _____ Individual _____ Other (explain) _____

6. Annual Permit Fee:

a. Base Fee: \$50.00

b. No. of Vehicles: _____ at \$25.00 per vehicle: \$ _____

Total Fee Attached: \$ _____ (5a + 5b) (attach check here)

7. Provide two credit references (bank, financial institution):

***DO NOT FILL IN IF "CASH" CUSTOMER !**

Name _____

Address _____

Telephone _____

Acct. No. _____

Name _____

Address _____

Telephone _____

Acct. No. _____

Requested Credit Limit _____

8. NYS Sales Tax ID No. (if available) _____

Part B: Credit Check Authorization Form

I hereby authorize the Fulton County Department of Solid Waste to verify my credit history, bank accounts, holdings and any other asset balances that are needed to process my landfill permit application. I further authorize the Fulton County Department of Solid Waste to order a credit report and verify other credit information. It is understood that a photocopy of this form will also serve as authorization.

The information the Fulton County Department of Solid Waste obtains is only to be used in processing my landfill permit application for the purpose of creation of a charge account for Department of Solid Waste services.

Applicant Business Name: _____

Contact Person: (print) _____

Signature) _____

Date: _____

NOTE: Only applicants that desire a Department of Solid Waste charge account must fill out this form

Part C: Vehicle Information

Applicant Business Name:

Number of units listed: _____ at \$25/unit = \$ _____

NOTE: Denote "N/A" if not applicable

	VEHICLE A	VEHICLE B	VEHICLE C
License Plate No.			
State of Issue			
Vehicle Type			
Make			
Capacity (C.Y.)			
NYS Part 364 Permit #			
Vehicle ID #: (Official Use Only)			
Account No.: _____ (Official use only)			

(use additional sheets, if necessary)

Part D: Waste Identification

Provide an estimate of annual quantities of waste or recyclables that you expect to be depositing annually at the Fulton County Sanitary Landfill or Recycling Facility, itemized by type and origin:

Waste Description	Village/Town/City	Approx. Tons/Year

Waste Description: Provide detailed estimate of quantities of each component of the waste stream; i.e. tons of sludge, asbestos, contaminated soil, construction and demolition, commercial waste, industrial waste, commercial recycling, etc.

Unless previously approved, all waste disposed of at the Fulton County Landfill must be from within the boundaries of Fulton County.

Part E: Hauler Certification

*NOTE: If the business listed in "Part A" desires landfill user charges sent directly to their mailing address **and** if the business listed in "Part A" sub-contracts all or some hauling to another business, this form must be completed.*

If a business listed in "Part A" hauls its own refuse with the vehicles listed in "Part C", go to "Part F".

CERTIFICATION:

I, _____, hereby certify that the following
(Business contact person)

hauler is hereby authorized to dispose of solid waste generated by my business, and the solid waste hauler is hereby authorized to instruct Department of Solid Waste staff that said solid waste fees should be assessed to said Undersigned Business account, and the Undersigned Business hereby agrees to promptly pay all invoices, per the requirements of Fulton County Solid Waste Management Law.

BUSINESS NAME: _____

Authorized Representative: _____
(Type or print)

Signature: _____

REFUSE HAULER: _____

Authorized Representative: _____
(Type or print)

Signature: _____

Part F: Toxicity Data

A Department of Environmental Conservation/Department of Health approved laboratory for toxicity must test any and all waste material that is subject to NYS Part 364 Transporter Regulations. The tests must be conducted with the TCLP method. Also, solids content information must be provided.

Laboratory results must be received a minimum of two weeks prior to the transportation of refuse to the Fulton County Landfill by each waste generator; tests must be conducted on each component of the waste stream; tests must be performed on random samples for TCLP parameters.

All laboratory data must be current; i.e. conducted within three months of permit application. A retest is needed if the generator implements a process change.

If applicable, attach laboratory results here.



Part G: Insurance Certificate

An insurance certificate must be provided, per the requirements of Fulton County Solid Waste Management Law. Insurance certificate must name the Fulton County Department of Solid Waste as Certificate Holder, and must have the following minimum automotive liability limits:

Combined Single Limit: \$500,000

-or-

Bodily Injury Per Person: \$250,000

Bodily Injury Per Accident: \$500,000

Property Damage: \$100,000

Part H: Certification

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this application package and all attached documents; I affirm that the submitted information is true, accurate and complete. I certify that no hazardous wastes (as defined by New York State and Environmental Protection Agency regulations), explosives, infectious wastes or radioactive wastes will be delivered by my business or in my vehicle(s) to the Fulton County Sanitary Landfill. I agree to indemnify and hold harmless the County of Fulton from any liability arising from the disposal of such wastes delivered by my business or my vehicle(s). I am aware that there are significant penalties for submitting false information, including the possibility of fines, imprisonment and the revocation of facility use.

I also certify that I will abide by the rules and regulations, as outlined in the Fulton County Solid Waste Management Law.

I also certify that all the information provided on this application is true and that I agree to all pay tipping fee billings within fifteen (15) days and understand that for any unpaid balance, a finance charge may be assessed.

I also certify that all refuse delivered by my business or in my vehicle(s) originates in the County of Fulton.

BUSINESS NAME: _____

ADDRESS: _____

PRINTED NAME: _____

SIGNATURE: _____

DATE: _____